

Filed By The Court

5/8/2025 5:37 PM

U.S. BANKRUPTCY COURT
DISTRICT OF SOUTH CAROLINA

UNITED STATES BANKRUPTCY COURT
DISTRICT OF SOUTH CAROLINA

IN RE:

CASE NO: 25-01384-JD

CHAPTER: 13

JACQUELINE ELIZABETH ARD and
TERRY FRANK NICOLA

DEBTOR(S)

STATEMENT OF CHANGE
(Fed. R. Bankr P. 1009; SC LBR 1009-1)

Please take notice the debtor(s) named above has filed with the Bankruptcy Court an amendment to documents submitted on April 10, 2025.

1. Amended Creditor Matrix with Verification of Amended Creditor Matrix
2. The Chapter 13 Plan has been amended
3. Statement of Financial Affairs has been amended
4. Schedules D, E/F, and H have been amended with removal/corrections of additional creditors
5. Receipt for filing fee of Additional Creditors

Notice of the Statement of change and the above-mentioned documents have been provided to all affected parties, via First Class Mail to each of the affected parties' known address, and to the US Trustee, and the case Trustee via Electronic Mail.

I, hereby, certify that all information provided is true and accurate to the best of my knowledge.

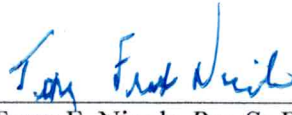
Date: 5/8/25



Jacqueline E. Ard *Pro Se* Debtor
239 Beach City Rd Unit 3218
Hilton Head Island, SC 29926
Jacquelineard72@gmail.com

Date: _____

5-8-25



Terry F. Nicola *Pro Se* Debtor

Mailing Address:

21215 Dartmouth Dr.

Southfield, MI 48076

Terrynicola30@gmail.com

Fill in this information to identify your case:

Debtor 1	Jacqueline	Elizabeth	Ard
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Terry	Frank	Nicola
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of South Carolina			
Case number (if known) 25-01384-JD			

☒ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim	Value of collateral that supports this claim	Unsecured portion
Do not deduct the value of collateral.		If any

2.1	Estate At Westbury Owners Assoc, Inc	Describe the property that secures the claim:	\$22,625.02	\$91,950.00	\$0.00
	Creditor's Name	PIN R600 031 000 0266 1106			
	Board of Directors	100 Kensington Blvd Unit 1106 Bluffton, SC 29910-7484 Estate at Westbury (violation of the automatic stay)			
	85 Kensington Blvd	As of the date you file, the claim is: Check all that apply.			
	Number Street	<input type="checkbox"/> Contingent			
	Bluffton, SC 29910-4884	<input type="checkbox"/> Unliquidated			
	City State ZIP Code	<input checked="" type="checkbox"/> Disputed			
	Who owes the debt? Check one.	Nature of lien. Check all that apply.			
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)			
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)			
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input checked="" type="checkbox"/> Judgment lien from a lawsuit			
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Other (including a right to offset) _____			
	<input type="checkbox"/> Check if this claim relates to a community debt				
	Date debt was incurred _____	Last 4 digits of account number 1 4 0 7			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$22,625.02

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
<u>2.2</u>	<p>Hilton Head Resort Four Seasons Centre</p> <p>Creditor's Name Wm Weston J Newton Jones, Simpson & Newton, PA</p> <p>Po Box 1938</p> <p>Number Street Bluffton, SC 29910-1938</p> <p>City State ZIP Code</p> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____</p> <p>Remarks: Alleged HOA fees</p>	<p>Describe the property that secures the claim: <u>\$43,493.32</u></p> <div style="border: 1px solid black; padding: 2px;"> <p>PIN R510 012 000 025B 4408</p> <p>663 William Hilton Pkwy Unit 4408 Hilton Head Island, SC 29928-3537</p> </div> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input checked="" type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> <p>Last 4 digits of account number <u>4 4 0 8</u></p>	<u>\$139,200.00</u>	<u>\$0.00</u>
Add the dollar value of your entries in Column A on this page. Write that number here:		<u>\$43,493.32</u>		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:				

Debtor 1	<u> Jacqueline </u>	<u> Elizabeth </u>	<u> Ard </u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u> Terry </u>	<u> Frank </u>	<u> Nicola </u>	
	First Name	Middle Name	Last Name	

	Additional Page	Column A Amount of claim <small>Do not deduct the value of collateral.</small>	Column B Value of collateral that supports this claim	Column C Unsecured portion <small>If any</small>	
Part 1:	<p>After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.</p>				
2.3	<p>Nationstar Mortgage, LLC</p> <p>Creditor's Name Attn: Bankruptcy Department PO Box 619096 Number Street Dallas, TX 75261-9741 City State ZIP Code</p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>01/27/2022</u></p>	<p>Describe the property that secures the claim: <u>\$211,866.31</u></p> <div style="border: 1px solid black; padding: 2px; margin: 5px 0;"> PIN R510 012 000 025B 4408 663 William Hilton Pkwy Unit 4408 Hilton Head Island, SC 29928-3537 </div> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input checked="" type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____</p> <p>Last 4 digits of account number <u>4 1 9 2</u></p>	<u>\$211,866.31</u>	<u>\$139,200.00</u>	<u>\$72,666.31</u>
2.4	<p>Norman Jewelry and Loan</p> <p>Creditor's Name 24777 Telegraph Suite B Number Street Southfield, MI 48034 City State ZIP Code</p> <p>Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>08/18/2024</u></p>	<p>Describe the property that secures the claim: <u>\$3,260.73</u></p> <div style="border: 1px solid black; padding: 2px; margin: 5px 0;"> Woman's custom made engagement ring </div> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____</p> <p>Last 4 digits of account number <u>1 6 4 7</u></p>	<u>\$3,260.73</u>	<u>\$25,000.00</u>	<u>\$0.00</u>
<p>Remarks: Refuse to Turnover Property of the Estate</p>					
<p>Add the dollar value of your entries in Column A on this page. Write that number here:</p>		<div style="border: 1px solid black; padding: 2px; width: 100px; margin: 0 auto;"><u>\$215,127.04</u></div>			
<p>If this is the last page of your form, add the dollar value totals from all pages. Write that number here:</p>		<div style="border: 1px solid black; padding: 2px; width: 100px; margin: 0 auto;"><u> </u></div>			

Debtor 1	<u> Jacqueline </u>	<u> Elizabeth </u>	<u> Ard </u>	Case number (if known) <u> 25-01384-JD </u>
Debtor 2	<u> Terry </u>	<u> Frank </u>	<u> Nicola </u>	
	First Name	Middle Name	Last Name	

	Additional Page	Column A Amount of claim <small>Do not deduct the value of collateral.</small>	Column B Value of collateral that supports this claim	Column C Unsecured portion <small>If any</small>
Part 1:	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.			
2.5	Polly Nicola <hr/> Creditor's Name 2583 Lower Assembly Drive <hr/> Number Street <hr/> Fort Mill, SC 29708 <hr/> City State ZIP Code <hr/> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number _____	Describe the property that secures the claim: <u> unknown </u> <u> \$2,508.87 </u> <u> \$0.00 </u> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Komatsu: Northern Trust (1)</div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u> Domestic: MSA (Non-Qualifying DSO) </u>		
	Remarks: Marital Settlement Agreement payment (Non-Alimony, Non-Spousal Support, Non-Separate Maintenance). Ex-spouse refuses to turnover collected funds			
2.6	Polly Nicola <hr/> Creditor's Name 2583 Lower Assembly Drive <hr/> Number Street <hr/> Fort Mill, SC 29708 <hr/> City State ZIP Code <hr/> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number _____	Describe the property that secures the claim: <u> unknown </u> <u> \$2,356.94 </u> <u> \$0.00 </u> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Komatsu: Northern Trust (2)</div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u> Domestic: Non-Qualifying DSO </u>		
	Remarks: Marital Settlement Agreement payment (Non-Alimony, Non-Spousal Support, Non-Separate Maintenance). Ex-spouse refuses to turnover collected funds			
Add the dollar value of your entries in Column A on this page. Write that number here:		<div style="border: 1px solid black; padding: 2px; width: 100px; margin: 0 auto;">\$0.00</div>		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		<div style="border: 1px solid black; padding: 2px; width: 100px; margin: 0 auto;"></div>		

Debtor 1	<u> Jacqueline </u>	<u> Elizabeth </u>	<u> Ard </u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u> Terry </u>	<u> Frank </u>	<u> Nicola </u>	
	First Name	Middle Name	Last Name	

	Additional Page	Column A Amount of claim <small>Do not deduct the value of collateral.</small>	Column B Value of collateral that supports this claim	Column C Unsecured portion <small>If any</small>
Part 1:	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.			
2.7	Polly Nicola <hr/> Creditor's Name 2583 Lower Assembly Drive <hr/> Number Street <hr/> Fort Mill, SC 29708 <hr/> City State ZIP Code <hr/> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt <hr/> Date debt was incurred _____ Last 4 digits of account number _____	Describe the property that secures the claim: <u>unknown</u> <u>\$1,242.06</u> <u>\$0.00</u> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Komatsu: Joy Global</div> <hr/> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <hr/> Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>Domestic: Non-Qualifying DSO</u>		
Remarks: Marital Settlement Agreement payment (Non-Alimony, Non-Spousal Support, Non-Separate Maintenance). Ex-spouse refuses to turnover collected funds				
2.8	The Spa on Port Royal Sound <hr/> Creditor's Name Board of Directors <hr/> 239 Beach City Rd <hr/> Number Street <hr/> Hilton Head, SC 29926-4707 <hr/> City State ZIP Code <hr/> Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt <hr/> Date debt was incurred <u>09/25/2023</u> Last 4 digits of account number <u>1 8 1 8</u>	Describe the property that secures the claim: <u>\$47,933.53</u> <u>\$132,450.00</u> <u>\$0.00</u> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">PIN R510 005 000 008B 3218 239 Beach City Rd Unit 3218 Hilton Head Island, SC 29926-4718</div> <hr/> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <hr/> Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____		
Add the dollar value of your entries in Column A on this page. Write that number here:		<div style="border: 1px solid black; padding: 2px; width: 100px; margin: 0 auto;"><u>\$47,933.53</u></div>		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		<div style="border: 1px solid black; padding: 2px; width: 100px; margin: 0 auto;"> </div>		

Debtor 1	<u> Jacqueline </u>	<u> Elizabeth </u>	<u> Ard </u>	Case number (if known) <u> 25-01384-JD </u>
Debtor 2	<u> Terry </u>	<u> Frank </u>	<u> Nicola </u>	
	First Name	Middle Name	Last Name	

	Additional Page	Column A Amount of claim <small>Do not deduct the value of collateral.</small>	Column B Value of collateral that supports this claim	Column C Unsecured portion <small>If any</small>
Part 1:	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.			
2.9	Title Max Corporation <hr/> Creditor's Name 15 Bull St <hr/> Number Street <hr/> Savannah, GA 31401-2685 City State ZIP Code <hr/> Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <u> 09/01/2024 </u>	Describe the property that secures the claim: <u> \$4,565.00 </u> <u> \$5,736.00 </u> <u> \$0.00 </u> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> 2017 Hyundai Elantra Needs Radiator and Transmission Work </div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u> Title Loan </u>		
2.10	West-Aircomm FCU <hr/> Creditor's Name Weltman, Weinberg & Reis Co LPA <hr/> 5990 W Creek Rd Ste 200 Number Street <hr/> Independence, OH 44131-2191 City State ZIP Code <hr/> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <u> 09/21/2018 </u>	Describe the property that secures the claim: <u> \$11,243.32 </u> <u> \$10,904.00 </u> <u> \$339.32 </u> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> 2018 Jeep Grand Cherokee Needs Transmission Work </div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____		
Add the dollar value of your entries in Column A on this page. Write that number here:		<u> \$15,808.32 </u>		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		 		

Debtor 1	<u> Jacqueline </u>	<u> Elizabeth </u>	<u> Ard </u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u> Terry </u>	<u> Frank </u>	<u> Nicola </u>	
	First Name	Middle Name	Last Name	

	Additional Page	Column A Amount of claim <small>Do not deduct the value of collateral.</small>	Column B Value of collateral that supports this claim	Column C Unsecured portion <small>If any</small>
Part 1:	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.			
2.11	Westlake Financial <hr/> Creditor's Name 2 Equity Way Ste 200 <hr/> Number Street <hr/> Westlake, OH 44145-1045 <hr/> City State ZIP Code <hr/> Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt <hr/> Date debt was incurred <u>03/28/2023</u>	Describe the property that secures the claim: <u>\$35,584.44</u> <u>\$7,475.00</u> <u>\$28,109.44</u> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> 2020 Ram Truck ProMaster Needs Transmission Work Commercial Use </div> <hr/> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <hr/> Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ <hr/> Last 4 digits of account number <u>7</u> <u>0</u> <u>8</u> <u>3</u>		
2.12	Zeidmans Jewelry & Loan of MI <hr/> Creditor's Name Best Law Tara E. Nauful <hr/> Po Box 2374 <hr/> Number Street <hr/> Mt Pleasant, SC 29465-2374 <hr/> City State ZIP Code <hr/> Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt <hr/> Date debt was incurred <u>07/29/2024</u>	Describe the property that secures the claim: <u>\$990.00</u> <u>\$3,500.00</u> <u>\$0.00</u> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> Earrings Ladies Hoop diamonds </div> <hr/> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <hr/> Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ <hr/> Last 4 digits of account number <u>6</u> <u>2</u> <u>1</u> <u>2</u>		
Remarks: Refused to turnover property of the Estate				
Add the dollar value of your entries in Column A on this page. Write that number here:		<div style="border: 1px solid black; padding: 5px; width: 100px; margin: 0 auto;"> <u>\$36,574.44</u> </div>		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		<div style="border: 1px solid black; padding: 5px; width: 100px; margin: 0 auto;"> </div>		

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

	Additional Page	Column A Amount of claim <small>Do not deduct the value of collateral.</small>	Column B Value of collateral that supports this claim	Column C Unsecured portion <small>If any</small>				
Part 1:	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.							
2.13	Zeidmans Jewelry & Loan of MI Describe the property that secures the claim: <u>\$172.50</u> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Ring Men Wedding Ring</div>	<u>\$172.50</u>	<u>\$700.00</u>	<u>\$0.00</u>				
	<table border="0" style="width: 100%;"> <tr> <td style="width: 30%;"> Creditor's Name Best Law Tara E. Nauful Po Box 2374 Number Street Mt Pleasant, SC 29465-2374 City State ZIP Code </td> <td style="width: 70%;"> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ </td> </tr> <tr> <td> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt </td> <td> Date debt was incurred <u>08/08/2024</u> Last 4 digits of account number <u>8 3 0 8</u> </td> </tr> </table>				Creditor's Name Best Law Tara E. Nauful Po Box 2374 Number Street Mt Pleasant, SC 29465-2374 City State ZIP Code	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt	Date debt was incurred <u>08/08/2024</u> Last 4 digits of account number <u>8 3 0 8</u>
Creditor's Name Best Law Tara E. Nauful Po Box 2374 Number Street Mt Pleasant, SC 29465-2374 City State ZIP Code	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____							
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt	Date debt was incurred <u>08/08/2024</u> Last 4 digits of account number <u>8 3 0 8</u>							
2.14	Zeidmans Jewelry & Loan of MI Describe the property that secures the claim: <u>\$172.50</u> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Earrings Ladies</div>	<u>\$172.50</u>	<u>\$600.00</u>	<u>\$0.00</u>				
	<table border="0" style="width: 100%;"> <tr> <td style="width: 30%;"> Creditor's Name Best Law Tara E. Nauful Po Box 2374 Number Street Mt Pleasant, SC 29465-2374 City State ZIP Code </td> <td style="width: 70%;"> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ </td> </tr> <tr> <td> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt </td> <td> Date debt was incurred <u>08/09/2024</u> Last 4 digits of account number <u>8 7 0 0</u> </td> </tr> </table>				Creditor's Name Best Law Tara E. Nauful Po Box 2374 Number Street Mt Pleasant, SC 29465-2374 City State ZIP Code	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt	Date debt was incurred <u>08/09/2024</u> Last 4 digits of account number <u>8 7 0 0</u>
Creditor's Name Best Law Tara E. Nauful Po Box 2374 Number Street Mt Pleasant, SC 29465-2374 City State ZIP Code	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____							
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt	Date debt was incurred <u>08/09/2024</u> Last 4 digits of account number <u>8 7 0 0</u>							
	Remarks: Refused to Turnover Property of the Estate							
	Add the dollar value of your entries in Column A on this page. Write that number here:		<div style="border: 1px solid black; padding: 2px; width: 100px; margin: 0 auto;"><u>\$345.00</u></div>					
	If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		<div style="border: 1px solid black; padding: 2px; width: 100px; margin: 0 auto;"><u> </u></div>					

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

	Additional Page	Column A Amount of claim <small>Do not deduct the value of collateral.</small>	Column B Value of collateral that supports this claim	Column C Unsecured portion <small>If any</small>	
Part 1:	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.				
2.15	Zeidmans Jewelry & Loan of MI <hr/> Creditor's Name Best Law Tara E. Nauful <hr/> Po Box 2374 Number Street Mt Pleasant, SC 29465-2374 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <u>08/09/2024</u> Last 4 digits of account number <u>8</u> <u>7</u> <u>0</u> <u>1</u> Remarks: Refused to Turnover Property of the Estate	Describe the property that secures the claim: <u>Bracelet Ladies</u> <hr/> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	\$308.75	\$1,200.00	\$0.00
2.16	Zeidmans Jewelry & Loan of MI <hr/> Creditor's Name Best Law Tara E. Nauful <hr/> Po Box 2374 Number Street Mt Pleasant, SC 29465-2374 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <u>08/10/2024</u> Last 4 digits of account number <u>8</u> <u>7</u> <u>7</u> <u>5</u> Remarks: Refuse to Turnover Property of the Estate	Describe the property that secures the claim: <u>Bracelet Ladies</u> <hr/> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	\$554.00	\$1,800.00	\$0.00
Add the dollar value of your entries in Column A on this page. Write that number here:		\$862.75			
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:					

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

	Additional Page	Column A Amount of claim <small>Do not deduct the value of collateral.</small>	Column B Value of collateral that supports this claim	Column C Unsecured portion <small>If any</small>
Part 1:	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.			
2.17	Zeidmans Jewelry & Loan of MI <hr/> Creditor's Name Best Law Tara E. Nauful <hr/> Po Box 2374 <hr/> Number Street Mt Pleasant, SC 29465-2374 <hr/> City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt <hr/> Date debt was incurred <u>08/10/2024</u>	Describe the property that secures the claim: <u>Bracelet Ladies</u> <hr/> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <hr/> Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ <hr/> Last 4 digits of account number <u>8</u> <u>7</u> <u>7</u> <u>6</u>		
		\$336.00	\$1,500.00	\$0.00
2.18	Zeidmans Jewelry & Loan of MI <hr/> Creditor's Name Best Law Tara E. Nauful <hr/> Po Box 2374 <hr/> Number Street Mt Pleasant, SC 29465-2374 <hr/> City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt <hr/> Date debt was incurred <u>08/30/2024</u>	Describe the property that secures the claim: <u>Gold Herring Bone Heirloom Necklace</u> <hr/> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <hr/> Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ <hr/> Last 4 digits of account number <u>2</u> <u>4</u> <u>5</u> <u>0</u>		
		\$663.00	\$2,500.00	\$0.00
Remarks: Refuse to Turnover Property of the Estate				
Add the dollar value of your entries in Column A on this page. Write that number here:		\$999.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:				

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
<u>2.19</u>	Zeidmans Jewelry & Loan of MI Describe the property that secures the claim: <u>\$3,344.40</u> Creditors Name: <u>Best Law Tara E. Nauful</u> <u>Po Box 2374</u> Number Street: <u>Mt Pleasant, SC 29465-2374</u> City State ZIP Code: Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <u>11/30/2024</u> Last 4 digits of account number <u>2 4 5 1</u> Remarks: Refuse to Turnover Property of the Estate	<u>\$3,344.40</u>	<u>\$23,740.00</u>	<u>\$0.00</u>
Add the dollar value of your entries in Column A on this page. Write that number here:		<u>\$3,344.40</u>		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		<u>\$387,112.82</u>		

Debtor 1	<u> Jacqueline </u>	<u> Elizabeth </u>	<u> Ard </u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u> Terry </u>	<u> Frank </u>	<u> Nicola </u>	
	First Name	Middle Name	Last Name	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

1.	Bromley Law Firm LLC Name <u>Evan K. Bromley</u> <u>211 Goethe Rd Ste B</u> Number Street <u>Bluffton, SC 29910-6014</u> City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.1</u> Last 4 digits of account number _ _ _ _
2.	Julie A. Franklin, Esq Name <u>Po Box 2976</u> Number Street <u>Bluffton, SC 29910-2976</u> City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.1</u> Last 4 digits of account number _ _ _ _
3.	Jones, Simpson, and Newton PA Name <u>Attn: Wm Weston J Newton</u> <u>7 Plantation Park Drive Suite 3</u> Number Street <u>Bluffton, SC 29910</u> City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.2</u> Last 4 digits of account number _ _ _ _
4.	Nationstar Mortgage, LLC Name <u>Attn: Bankruptcy Department</u> <u>PO Box 619096</u> Number Street <u>Dallas, TX 75261-9741</u> City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.3</u> Last 4 digits of account number _ _ _ _
5.	Taybron Law Firm LLC Name <u>3399 Churchview Ave</u> Number Street <u>Pittsburgh, PA 15227-4358</u> City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.5</u> Last 4 digits of account number _ _ _ _
6.	Morgan Lewis & Bockius LLP Name <u>Attn: Matt Hawes</u> <u>One Oxford Centre, Thirty-Second FLR</u> Number Street <u>Pittsburgh, PA 15219-6401</u> City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.5</u> Last 4 digits of account number _ _ _ _

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: List Others to Be Notified for a Debt That You Already Listed - Additional Page

7.	Komatsu Benefit Dept Name <u>Mark Harder</u> <u>401 E Greenfield Ave</u> Number Street <u>Milwaukee, WI 53204-2941</u> City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.5</u> Last 4 digits of account number _ _ _ _
8.	Taybron Law Firm LLC Name <u>3399 Churchview Ave</u> Number Street <u>Pittsburgh, PA 15227-4358</u> City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.6</u> Last 4 digits of account number _ _ _ _
9.	Komatsu Benefit Dept Name <u>Mark Harder</u> <u>401 E Greenfield Ave</u> Number Street <u>Milwaukee, WI 53204-2941</u> City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.6</u> Last 4 digits of account number _ _ _ _
10.	Morgan Lewis & Bockius LLP Name <u>Attn: Matt Hawes</u> <u>One Oxford Centre, Thirty-Second FLR</u> Number Street <u>Pittsburgh, PA 15219-6401</u> City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.6</u> Last 4 digits of account number _ _ _ _
11.	Taybron Law Firm LLC Name <u>3399 Churchview Ave</u> Number Street <u>Pittsburgh, PA 15227-4358</u> City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.7</u> Last 4 digits of account number _ _ _ _
12.	Komatsu Benefit Dept Name <u>Mark Harder</u> <u>401 E Greenfield Ave</u> Number Street <u>Milwaukee, WI 53204-2941</u> City State ZIP Code	On which line in Part 1 did you enter the creditor? <u>2.7</u> Last 4 digits of account number _ _ _ _

Debtor 1	Jacqueline	Elizabeth	Ard	Case number (if known) 25-01384-JD
Debtor 2	Terry	Frank	Nicola	
	First Name	Middle Name	Last Name	

Part 2: List Others to Be Notified for a Debt That You Already Listed - Additional Page

<p>13. Morgan Lewis & Bockius LLP</p> <p>Name</p> <p>Attn: Matt Hawes</p> <p>One Oxford Centre, Thirty-Second FLR</p> <p>Number Street</p> <p>Pittsburgh, PA 15219-6401</p> <p>City State ZIP Code</p>	<p>On which line in Part 1 did you enter the creditor? 2.7</p> <p>Last 4 digits of account number _____</p>
<p>14. Law Office of Scott M. Wild LLC</p> <p>Name</p> <p>Scott M. Wild</p> <p>37 New Orleans Road Suite F</p> <p>Number Street</p> <p>Hilton Head Island, SC 29928</p> <p>City State ZIP Code</p>	<p>On which line in Part 1 did you enter the creditor? 2.8</p> <p>Last 4 digits of account number _____</p>
<p>15. Mutterer Law Firm, LLC</p> <p>Name</p> <p>Jannine M. Mutterer, Esq</p> <p>5 Red Cedar Street Suite 102</p> <p>Number Street</p> <p>Bluffton, SC 29910</p> <p>City State ZIP Code</p>	<p>On which line in Part 1 did you enter the creditor? 2.8</p> <p>Last 4 digits of account number _____</p>
<p>16. Smith Debnam Narron Drake Saintsing</p> <p>Name</p> <p>& Myers, LLP Lucas S. Fautua</p> <p>171 Church St Ste 120c</p> <p>Number Street</p> <p>Charleston, SC 29401-3136</p> <p>City State ZIP Code</p>	<p>On which line in Part 1 did you enter the creditor? 2.8</p> <p>Last 4 digits of account number _____</p>

Fill in this information to identify your case:

Debtor 1	Jacqueline	Elizabeth	Ard
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Terry	Frank	Nicola
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of South Carolina			
Case number (if known)	25-01384-JD		

☒ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☐ No. Go to Part 2.
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1 Beaufort County Treasurer Priority Creditor's Name Property Tax Po Box 105176 Number Street Atlanta, GA 30348-5176 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: PIN: R510-005-000-008B-3218	Last 4 digits of account number 3 2 1 8 When was the debt incurred? 01/15/2025 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify Real Estate Taxes	\$3,702.32 unknown \$3,702.32	

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.				Total claim	Priority amount	Nonpriority amount
<u>2.2</u>	<u>Beaufort County Treasurer</u>	Last 4 digits of account number	<u>1 1 0 6</u>	<u>\$2,021.07</u>	<u>unknown</u>	<u>\$2,021.07</u>
Priority Creditor's Name		When was the debt incurred? <u>01/15/2025</u>				
<u>Property Tax</u>						
<u>Po Box 105176</u>		As of the date you file, the claim is: Check all that apply.				
Number Street		<input type="checkbox"/> Contingent				
<u>Atlanta, GA 30348-5176</u>		<input type="checkbox"/> Unliquidated				
City State ZIP Code		<input type="checkbox"/> Disputed				
Who incurred the debt? Check one.						
<input type="checkbox"/> Debtor 1 only		Type of PRIORITY unsecured claim:				
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Domestic support obligations				
<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Taxes and certain other debts you owe the government				
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Claims for death or personal injury while you were intoxicated				
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>Real Estate Taxes</u>				
Is the claim subject to offset?						
<input checked="" type="checkbox"/> No						
<input type="checkbox"/> Yes						
Remarks: PIN: R600-031-000-0266-1106						
<u>2.3</u>	<u>Beaufort County Treasurer</u>	Last 4 digits of account number	<u>4 4 0 5</u>	<u>\$3,761.77</u>	<u>unknown</u>	<u>\$3,761.77</u>
Priority Creditor's Name		When was the debt incurred? <u>01/15/2025</u>				
<u>Property Tax</u>						
<u>Po Box 105176</u>		As of the date you file, the claim is: Check all that apply.				
Number Street		<input type="checkbox"/> Contingent				
<u>Atlanta, GA 30348-5176</u>		<input type="checkbox"/> Unliquidated				
City State ZIP Code		<input type="checkbox"/> Disputed				
Who incurred the debt? Check one.						
<input type="checkbox"/> Debtor 1 only		Type of PRIORITY unsecured claim:				
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Domestic support obligations				
<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Taxes and certain other debts you owe the government				
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Claims for death or personal injury while you were intoxicated				
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>Real Estate Taxes</u>				
Is the claim subject to offset?						
<input checked="" type="checkbox"/> No						
<input type="checkbox"/> Yes						
Remarks: PIN: R510-012-000-025B-4405						

Debtor 1	<u> Jacqueline </u>	<u> Elizabeth </u>	<u> Ard </u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u> Terry </u>	<u> Frank </u>	<u> Nicola </u>	
	First Name	Middle Name	Last Name	

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.				Total claim	Priority amount	Nonpriority amount
<u>2.4</u>	City of Detroit Water and Sewerage Dept <hr/> Priority Creditor's Name 735 Randolph St <hr/> Number Street <hr/> Detroit, MI 48226-2830 <hr/> City State ZIP Code	Last 4 digits of account number <u>0</u> <u>3</u> <u>0</u> <u>1</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$1,383.51	unknown	\$1,383.51	
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt						
Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>Utilities</u>						
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes						
<u>2.5</u>	City of Detroit Water and Sewerage Dept <hr/> Priority Creditor's Name 735 Randolph St <hr/> Number Street <hr/> Detroit, MI 48226-2830 <hr/> City State ZIP Code	Last 4 digits of account number <u>3</u> <u>3</u> <u>0</u> <u>1</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$1,782.38	unknown	\$1,782.38	
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt						
Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>Utilities</u>						
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes						

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.				Total claim	Priority amount	Nonpriority amount
<u>2.6</u>	Consumer Energy Company Priority Creditor's Name Attn: Legal Dept One Energy Plaza Dr Number Street Jackson, MI 49201-2357 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: Utility Services	Last 4 digits of account number <u>8 5 2 5</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>Utilities</u>	<u>\$347.83</u>	<u>\$347.83</u>	<u>\$0.00</u>	
<u>2.7</u>	County of Allegheny Treasurer Priority Creditor's Name Room 108 Courthouse 436 Grant St Number Street Pittsburgh, PA 15219 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>P 1 4 6</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>Real Estate Taxes</u>	<u>\$116.36</u>	<u>unknown</u>	<u>\$116.36</u>	

Debtor 1 Jacqueline Elizabeth Ard Case number (if known) 25-01384-JD
 Debtor 2 Terry Frank Nicola
 First Name Middle Name Last Name

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.				Total claim	Priority amount	Nonpriority amount
<u>2.8</u>	East Pittsburgh Borough Priority Creditor's Name <u>813 Linden Ave</u> Number Street <u>East Pittsburgh, PA 15112</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: 513 Main	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>Real Estate Taxes</u>	<u>P 1 4 6</u>	<u>\$363.96</u>	<u>unknown</u>	<u>\$363.96</u>
<u>2.9</u>	Jordan Tax Service Priority Creditor's Name <u>102 Rahway Rd</u> Number Street <u>McMurray, PA 15317</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>Real Estate Taxes</u>	<u>P 1 4 6</u>	<u>\$1,179.46</u>	<u>unknown</u>	<u>\$1,179.46</u>

Debtor 1 Jacqueline Elizabeth Ard Case number (if known) 25-01384-JD
 Debtor 2 Terry Frank Nicola
 First Name Middle Name Last Name

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.				Total claim	Priority amount	Nonpriority amount
2.10	Lincoln Township Priority Creditor's Name P.O. Box 239 Number Street Lake George, MI 48633 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>7 0 0 1</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>Real Estate Taxes</u>	<u>\$1,638.11</u>	<u>unknown</u>	<u>\$1,638.11</u>	
2.11	Lincoln Township Priority Creditor's Name P.O. Box 239 Number Street Lake George, MI 48633 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: 5154 Oak Run	Last 4 digits of account number <u>1 6 0 0</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>Real Estate Taxes</u>	<u>\$1,711.02</u>	<u>unknown</u>	<u>\$1,711.02</u>	

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.				Total claim	Priority amount	Nonpriority amount
2.12	Pittsburgh Water Priority Creditor's Name Penn Liberty Plaza I 1200 Penn Avenue Number Street Pittsburgh, PA 15222 City State ZIP Code	Last 4 digits of account number <u>M A I N</u> When was the debt incurred? <u>03/23/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>unknown</u>	<u>unknown</u>	<u>unknown</u>	
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>Utilities</u>				
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes						
2.13	SC Department of Revenue Priority Creditor's Name Office of General Counsel 300A Outlet Point Blvd Number Street Columbia, SC 29210 City State ZIP Code	Last 4 digits of account number <u>3 7 4 8</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$0.00</u>	<u>unknown</u>	<u>\$0.00</u>	
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____				
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes						

Debtor 1 Jacqueline Elizabeth Ard Case number (if known) 25-01384-JD
 Debtor 2 Terry Frank Nicola
 First Name Middle Name Last Name

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.				Total claim	Priority amount	Nonpriority amount
2.14	Wayne Co Treasurer	Last 4 digits of account number	<u>7 3 7 1</u>	<u>\$1,238.00</u>	<u>unknown</u>	<u>\$1,238.00</u>
Priority Creditor's Name		When was the debt incurred? _____				
<u>400 Monroe 5th floor</u>						
Number Street						
<u>Detroit, MI 48226</u>		As of the date you file, the claim is: Check all that apply.				
City State ZIP Code		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed				
Who incurred the debt? Check one.		Type of PRIORITY unsecured claim:				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>Real Estate Taxes</u>				
Is the claim subject to offset?						
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes						
2.15	Wayne Co Treasurer	Last 4 digits of account number	<u>1 1 0 9</u>	<u>\$1,006.69</u>	<u>unknown</u>	<u>\$1,006.69</u>
Priority Creditor's Name		When was the debt incurred? _____				
<u>400 Monroe 5th Floor</u>						
Number Street						
<u>Detroit, MI 48266</u>		As of the date you file, the claim is: Check all that apply.				
City State ZIP Code		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed				
Who incurred the debt? Check one.		Type of PRIORITY unsecured claim:				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>Real Estate Taxes</u>				
Is the claim subject to offset?						
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes						

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

				Total claim
4.1	ADT Security Services	Last 4 digits of account number	<u>9 0 9 4</u>	\$1,599.69
Nonpriority Creditor's Name		When was the debt incurred?		
Po Box 371878		<u>10/01/2024</u>		
Number Street		As of the date you file, the claim is: Check all that apply.		
Pittsburgh, PA 15250-7878		<input type="checkbox"/> Contingent		
City State ZIP Code		<input type="checkbox"/> Unliquidated		
		<input checked="" type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>Consumer debt</u>		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
4.2	Advantage Aviator Bankruptcy Dept	Last 4 digits of account number	<u>7 5 4 0</u>	\$20,400.68
Nonpriority Creditor's Name		When was the debt incurred?		
Portfolio Recovery Associates, LLC				
130 Corporate Blvd		As of the date you file, the claim is: Check all that apply.		
Number Street		<input type="checkbox"/> Contingent		
Norfolk, VA 23502-4952		<input type="checkbox"/> Unliquidated		
City State ZIP Code		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input checked="" type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.3 <u>American Express National Bank</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Becket and Lee LLP</u></p> <p><u>P.O. Box 3001</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Malvern, PA 19355</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>4 0 0 2</u></p> <p>When was the debt incurred? <u>07/1/2023</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p><u>\$42,254.50</u></p>
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<p>4.4 <u>American Express National Bank</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Becket and Lee LLP</u></p> <p><u>P.O. Box 3001</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Malvern, PA 19355</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>2 0 0 6</u></p> <p>When was the debt incurred? <u>06/01/2024</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p><u>\$1,172.92</u></p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.5</p> <p><u>Armstrong Cable</u></p> <p>Nonpriority Creditor's Name</p> <p><u>PO Box 37749</u></p> <p>Number Street</p> <p><u>Philadelphia, PA 19101-5049</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>1 1 0 3</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Utilities</u></p>	<p><u>\$306.17</u></p>
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<p>4.6</p> <p><u>AT&T</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Valor Intelligent Processing, LLC</u></p> <p><u>PO Box 5014</u></p> <p>Number Street</p> <p><u>Carol Stream, IL 60197-5014</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>8 8 2 7</u></p> <p>When was the debt incurred? <u>09/15/2024</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Utilities</u></p>	<p><u>\$606.86</u></p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.7 <u>AWA Collections</u></p> <p>Nonpriority Creditor's Name <u>Santa Rosa Emergency</u></p> <p><u>PO Box 6605</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Orange, CA 92863</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u></p> <p>When was the debt incurred? <u> </u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u></p>	<p><u>unknown</u></p>
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<p>4.8 <u>Capital One Auto Finance</u></p> <p>Nonpriority Creditor's Name <u>AIS Portfolio Services, LLC</u></p> <p><u>4515 N Santa Fe Ave. Dept. APS</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Oklahoma City, OK 73118</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u> 7 </u> <u> 7 </u> <u> 4 </u> <u> 3 </u></p> <p>When was the debt incurred? <u> </u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Consumer Debt</u></p>	<p><u>\$0.00</u></p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.9 <u>CitiBank Best Buy</u></p> <p>Nonpriority Creditor's Name</p> <p><u>P.O. Box 790034</u></p> <p>Number Street</p> <p><u>Saint Louis, MO 63179-0034</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>6 6 9 2</u></p> <p>When was the debt incurred? <u>09/12/2024</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>	<p>\$2,942.86</p>
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<p>4.10 <u>Comenity Caesars Rewards</u></p> <p>Nonpriority Creditor's Name</p> <p><u>PO Box 650960</u></p> <p>Number Street</p> <p><u>Dallas, TX 75265</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0 3 0 5</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p>\$5,181.32</p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.11 <u>Coyne Oil</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Attn: Rose</u></p> <p><u>513 W 5th St</u></p> <p>Number Street</p> <p><u>Clare, MI 48617-9405</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3</u> <u>1</u> <u>2</u> <u>9</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Utilities</u></p>	<p>\$64.00</p>
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<p>4.12 <u>DirectTV, LLC</u></p> <p>Nonpriority Creditor's Name</p> <p><u>CT Corporation</u></p> <p><u>1209 N Orange St</u></p> <p>Number Street</p> <p><u>Wilmington, DE 19801-1120</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>8</u> <u>8</u> <u>2</u> <u>7</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>	<p>\$620.81</p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.13	DTE Energy Nonpriority Creditor's Name Attention Legal Department PO Box 740786 Number <u> </u> Street <u> </u> Cincinnati, OH 45274-0786 City <u> </u> State <u> </u> ZIP Code <u> </u>	Last 4 digits of account number <u> 8 9 1 4 </u> When was the debt incurred? <u> </u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Utilities</u>	\$1,271.71
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: Utility Services 15826 Appoline			

4.14	DTE Energy Nonpriority Creditor's Name Attention Legal Department PO Box 740786 Number <u> </u> Street <u> </u> Cincinnati, OH 45274-0786 City <u> </u> State <u> </u> ZIP Code <u> </u>	Last 4 digits of account number <u> 8 9 2 2 </u> When was the debt incurred? <u> </u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Utilities</u>	\$1,730.37
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.										Total claim
4.15	First Energy Nonpriority Creditor's Name Penn Power Po Box 16001 Number _____ Street _____ Reading, PA 19612-6001 City _____ State _____ ZIP Code _____				Last 4 digits of account number <u>7</u> <u>2</u> <u>8</u> <u>4</u> When was the debt incurred? <u>07/25/2024</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____				\$2,780.70	
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt										
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes										
4.16	Fortiva Bobs Discount Nonpriority Creditor's Name TBOM - ATLSA 6 Concourse Parkway Second Floor Number _____ Street _____ Atlanta, GA 30328 City _____ State _____ ZIP Code _____				Last 4 digits of account number <u>3</u> <u>5</u> <u>6</u> <u>2</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>				\$2,182.29	
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt										
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes										

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.17 <u>Go-Store It</u></p> <p>Nonpriority Creditor's Name</p> <p><u>33 Parmenter Rd.</u></p> <p>Number Street</p> <p><u>Bluffton, SC 29910</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Remarks: D0013-15x15x8</p>	<p>Last 4 digits of account number <u>1 0 5 4</u></p> <p>When was the debt incurred? <u>09/30/2024</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Storage Bill</u></p>	<p>\$608.20</p>
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<p>4.18 <u>Go-Store It</u></p> <p>Nonpriority Creditor's Name</p> <p><u>33 Parmenter Rd.</u></p> <p>Number Street</p> <p><u>Bluffton, SC 29910</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Remarks: A0002</p>	<p>Last 4 digits of account number <u>8 8 0 4</u></p> <p>When was the debt incurred? <u>11/01/2024</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Storage Bill</u></p>	<p>\$96.00</p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.19 <u>Go-Store It</u></p> <p>Nonpriority Creditor's Name</p> <p><u>33 Parmenter Rd.</u></p> <p>Number Street</p> <p><u>Bluffton, SC 29910</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Remarks: C0029</p>	<p>Last 4 digits of account number <u>1 0 9 6</u></p> <p>When was the debt incurred? <u>10/01/2024</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Storage Bill</u></p>	<p><u>\$507.60</u></p>
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<p>4.20 <u>Go-Store It</u></p> <p>Nonpriority Creditor's Name</p> <p><u>33 Parmenter Rd.</u></p> <p>Number Street</p> <p><u>Bluffton, SC 29910</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Remarks: E0004A</p>	<p>Last 4 digits of account number <u>1 0 6 8</u></p> <p>When was the debt incurred? <u>10/01/2024</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Storage Bill</u></p>	<p><u>\$343.20</u></p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.21 <u>Go-Store It</u></p> <p>Nonpriority Creditor's Name</p> <p><u>33 Parmenter Rd.</u></p> <p>Number Street</p> <p><u>Bluffton, SC 29910</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Remarks: A0003</p>	<p>Last 4 digits of account number <u>1</u> <u>0</u> <u>9</u> <u>5</u></p> <p>When was the debt incurred? <u>10/01/2024</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Storage Bill</u></p>	<p><u>\$291.80</u></p>
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<p>4.22 <u>Hilton Head Resort Four Seasons Centre</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Wm Weston J Newton Jones, Simpson & Newton, PA</u></p> <p><u>Po Box 1938</u></p> <p>Number Street</p> <p><u>Bluffton, SC 29910-1938</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>1</u> <u>3</u> <u>0</u> <u>5</u></p> <p>When was the debt incurred? <u>06/30/2023</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>HOA fines</u></p>	<p><u>\$5,297.63</u></p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.23 <u>Home Depot Commercial</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Centralized bankruptcy</u></p> <p><u>PO Box 790034</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Saint Louis, MO 63179</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u> 2 8 0 8 </u></p> <p>When was the debt incurred? <u> </u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p>\$10,381.06</p>
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<p>4.24 <u>Home Depot Loan #3877</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Po Box 2730</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Alpharetta, GA 30023-2730</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u> 6 7 1 9 </u></p> <p>When was the debt incurred? <u>03/13/2018</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p>\$2,672.38</p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<div style="border: 1px solid black; padding: 2px;">4.25</div>	<p>Hughes Network Systems</p> <p>Nonpriority Creditor's Name <u>PO Box 96874</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Chicago, IL 60693-6874</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u> 2 9 3 6 </u></p> <p>When was the debt incurred? <u> 11/01/2024 </u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u> Utilities </u></p>	<p><u>\$0.00</u></p>
<div style="border: 1px solid black; padding: 2px;">4.26</div>	<p>JPMC</p> <p>Nonpriority Creditor's Name <u>c/o National Bankruptcy Services, LLC</u></p> <p><u>PO Box 9013</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Addison, TX 75001</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u> 5 6 7 1 </u></p> <p>When was the debt incurred? <u> 01/03/2024 </u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u> Credit Card </u></p>	<p><u>\$17,242.49</u></p>

Debtor 1	<u> Jacqueline </u>	<u> Elizabeth </u>	<u> Ard </u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u> Terry </u>	<u> Frank </u>	<u> Nicola </u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.27 <u>JPMorgan Chase Bank, N.A.</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Robertson, Anschutz, Schneid, Crane</u></p> <p><u>6409 Congress Avenue Ste. 100</u></p> <p>Number Street</p> <p><u>Boca Raton, FL 33487</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5</u> <u>0</u> <u>4</u> <u>2</u></p> <p>When was the debt incurred? <u>03/22/2024</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p>\$17,349.55</p>
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<p>4.28 <u>JPMorgan Chase Bank, N.A.</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Robertson, Anschutz, Schneid, Crane</u></p> <p><u>6409 Congress Avenue 100</u></p> <p>Number Street</p> <p><u>Boca Raton, FL 33487</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0</u> <u>9</u> <u>4</u> <u>9</u></p> <p>When was the debt incurred? <u>03/28/2024</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p>\$33,411.50</p>
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Debtor 1	<u> Jacqueline </u>	<u> Elizabeth </u>	<u> Ard </u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u> Terry </u>	<u> Frank </u>	<u> Nicola </u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.29 <u>Kohls</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Khols Payment Center</u></p> <p><u>PO Box 3043</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Milwaukee, WI 53201-3043</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u></p> <p>When was the debt incurred? <u> </u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p><u>\$1,405.66</u></p>
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<p>4.30 <u>LVNV Funding, LLC</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Resurgent Capital Services</u></p> <p><u>PO Box 10587</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Greenville, SC 29603-0587</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u> 5 </u> <u> 1 </u> <u> 4 </u> <u> 3 </u></p> <p>When was the debt incurred? <u>10/09/2024</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p><u>\$267.15</u></p>
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Remarks: Uniform Claim ID: RSG-00248-804400462

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.31 <u>LVNV Funding, LLC</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Resurgent Captial Services</u></p> <p><u>PO Box 10587</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Greenville, SC 29603-0587</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Remarks: Uniform Claim ID: RSG-00248-804407818</p>	<p>Last 4 digits of account number <u>6 9 7 8</u></p> <p>When was the debt incurred? <u>10/09/2024</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p><u>\$801.28</u></p>
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<p>4.32 <u>Medical University of South Carolina</u></p> <p>Nonpriority Creditor's Name</p> <p><u>1 Poston Rd Ste 220</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Charleston, SC 29407</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>7 2 7 5</u></p> <p>When was the debt incurred? <u>04/08/2025</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u></p>	<p><u>unknown</u></p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.33 <u>NES</u></p> <p>Nonpriority Creditor's Name <u>PNC Bank</u></p> <p><u>2479 Edison Blvd Unit A</u></p> <p>Number <u>2479</u> Street <u>Edison Blvd Unit A</u></p> <p><u>Twinsburg, OH 44087</u></p> <p>City <u>Twinsburg</u> State <u>OH</u> ZIP Code <u>44087</u></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3</u> <u>7</u> <u>1</u> <u>3</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>	<p><u>\$10,323.49</u></p>
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<p>4.34 <u>NES</u></p> <p>Nonpriority Creditor's Name <u>PNC Bank</u></p> <p><u>2479 Edison Blvd Unit A</u></p> <p>Number <u>2479</u> Street <u>Edison Blvd Unit A</u></p> <p><u>Twinsburg, OH 44087</u></p> <p>City <u>Twinsburg</u> State <u>OH</u> ZIP Code <u>44087</u></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3</u> <u>4</u> <u>0</u> <u>3</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>	<p><u>\$8,960.51</u></p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.35	Office Depot Commercial	Last 4 digits of account number	<u>0</u> <u>3</u> <u>6</u> <u>0</u>	\$1,889.18
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Nonpriority Creditor's Name

PO Box 70612

Number Street

Philadelphia, PA 19176-0612

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify _____

4.36	Ohio Turnpike Easy Pass	Last 4 digits of account number	_____	unknown
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Nonpriority Creditor's Name

PO Box 94672

Number Street

Cleveland, OH 44101

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Toll charges

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.37	Pacer Service Center	Last 4 digits of account number	<u>3</u> <u>3</u> <u>6</u> <u>3</u>	\$1,035.20
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Nonpriority Creditor's Name

PO Box 780549

Number Street

San Antonio, TX 78278

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred?

03/10/2025

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Consumer Debt

4.38	Palmetto Electric Cooperative Inc	Last 4 digits of account number	<u>4</u> <u>0</u> <u>0</u> <u>7</u>	\$856.04
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Nonpriority Creditor's Name

Michelle Tyler

111 Matthews Drive

Number Street

Hilton Head Island, SC 29926

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred?

01/27/2025

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Utilities

Remarks: Utility Services for 3218

Debtor 1	<u> Jacqueline </u>	<u> Elizabeth </u>	<u> Ard </u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u> Terry </u>	<u> Frank </u>	<u> Nicola </u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.39</p> <p><u>Peoples Gas</u></p> <p>Nonpriority Creditor's Name</p> <p><u>National Recovery Agency</u></p> <p><u>PO Box 644760</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Pittsburgh, PA 15264-4760</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u> 1 <u>6</u> <u>3</u> <u>9</u> </u></p> <p>When was the debt incurred? <u> 04/23/2019 </u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u> Utilities </u></p>	<p><u>\$860.53</u></p>
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<p>4.40</p> <p><u>PODS Enterprises, LLC</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Legal Department</u></p> <p><u>5585 Rio Vista Dr.</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Clearwater, FL 33760</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u> 4 <u>6</u> <u>1</u> <u>4</u> </u></p> <p>When was the debt incurred? <u> 10/01/2024 </u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u> Storage Bill </u></p>	<p><u>\$1,883.00</u></p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.41 <u>Quantum3 Group LLC</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Agent for Crown Asset Management LLC</u></p> <p><u>PO Box 788</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Kirkland, WA 98083-0788</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Remarks: Uniform Claim ID: Q2141424518</p>	<p>Last 4 digits of account number <u>7 0 0 2</u></p> <p>When was the debt incurred? <u>09/05/2023</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p><u>\$4,073.98</u></p>
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<p>4.42 <u>Resurgent Receivables, LLC</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Resurgent Capital Services</u></p> <p><u>PO Box 10587</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Greenville, SC 29603-0587</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Remarks: Uniform Claim ID: RSG-00248-804427110</p>	<p>Last 4 digits of account number <u>7 4 7 8</u></p> <p>When was the debt incurred? <u>05/15/2024</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p><u>\$485.80</u></p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.43 <u>SC Department of Motor Vehicles</u></p> <p>Nonpriority Creditor's Name</p> <p><u>SC Driver Records</u></p> <p><u>PO Box 1498</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Blythewood, SC 29016-0028</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>7 0 2 5</u></p> <p>When was the debt incurred? <u> </u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Tickets</u></p>	<p><u>unknown</u></p>
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<p>4.44 <u>Synchrony Bank</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Paypal Credit</u></p> <p><u>PO Box 669809</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Dallas, TX 75266</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>1 3 5 4</u></p> <p>When was the debt incurred? <u> </u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u> </u></p>	<p><u>\$3,493.08</u></p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.45 <u>Synchrony Bank Sams Business</u></p> <p>Nonpriority Creditor's Name</p> <p><u>PO Box 669809</u></p> <p>Number Street</p> <p><u>Dallas, TX 75266</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5</u> <u>4</u> <u>8</u> <u>7</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p>\$6,016.04</p>
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<p>4.46 <u>Synchrony Bank Sams Master Card</u></p> <p>Nonpriority Creditor's Name</p> <p><u>PO Box 669809</u></p> <p>Number Street</p> <p><u>Dallas, TX 75266</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>7</u> <u>8</u> <u>2</u> <u>2</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p>\$8,690.41</p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.47 <u>Synchrony Bank Score Rewards</u></p> <p>Nonpriority Creditor's Name <u>PO Box 669809</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Dallas, TX 75266</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u> </u></p> <p>When was the debt incurred? <u> </u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p><u>\$854.71</u></p>
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<p>4.48 <u>TD Bank</u></p> <p>Nonpriority Creditor's Name <u>PO Box 840</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Columbus, GA 31908</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>2 5 7 3</u></p> <p>When was the debt incurred? <u> </u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Bank Account</u></p>	<p><u>unknown</u></p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.49 <u>TD Bank</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Target Card Services</u></p> <p><u>PO Box 673</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Minneapolis, MN 55440-0673</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u> 3 4 7 7 </u></p> <p>When was the debt incurred? <u> </u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p>\$2,398.35</p>
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<p>4.50 <u>The Huntington National Bank</u></p> <p>Nonpriority Creditor's Name</p> <p><u>PO Box 89424 OPC856</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Cleveland, OH 44101</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u> 3 0 5 8 </u></p> <p>When was the debt incurred? <u>10/26/2023</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p>\$12,878.39</p>
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Debtor 1	<u> Jacqueline </u>	<u> Elizabeth </u>	<u> Ard </u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u> Terry </u>	<u> Frank </u>	<u> Nicola </u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.51 <u>The Huntington National Bank</u></p> <p>Nonpriority Creditor's Name</p> <p><u>PO Box 89424 OPC856</u></p> <p>Number Street</p> <p><u>Cleveland, OH 44101</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>7</u> <u>0</u> <u>4</u> <u>3</u></p> <p>When was the debt incurred? <u>07/24/2023</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p>\$14,395.02</p>
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<p>4.52 <u>The Woodlands at Saint Barnabas, inc</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Thomas E. Breath</u></p> <p><u>128 West Cunningham St</u></p> <p>Number Street</p> <p><u>Butler, PA 16001</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>1</u> <u>0</u> <u>1</u> <u>8</u></p> <p>When was the debt incurred? <u>10/04/2024</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Rent</u></p>	<p>\$58,550.40</p>
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Remarks: Dillon, McCandless, King, Coulter & Graham, LLP

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.53 <u>T-Mobile</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Po Box 53410</u></p> <p>Number Street</p> <p><u>Bellevue, WA 98015-3410</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>6</u> <u>2</u> <u>3</u> <u>7</u></p> <p>When was the debt incurred? <u>10/01/2024</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u></p>	<p><u>\$956.78</u></p>
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<p>4.54 <u>Traffic Magistrate</u></p> <p>Nonpriority Creditor's Name</p> <p><u>4819 Bluffton Parkway</u></p> <p>Number Street</p> <p><u>Bluffton, SC 29910</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Ticket</u></p>	<p><u>unknown</u></p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.55 <u>U.S. Department of Education</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Nelnet</u></p> <p><u>121 South 13th St</u></p> <p>Number Street</p> <p><u>Lincoln, NE 68508</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3 7 4 8</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input checked="" type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Other. Specify _____</p>	<p><u>\$76,223.69</u></p>
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<p>4.56 <u>Verizon</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Wireless Bankruptcy Administration</u></p> <p><u>500 Technology Dr Ste. 500</u></p> <p>Number Street</p> <p><u>Saint Charles, MO 63304</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0 0 0 1</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>	<p><u>\$987.01</u></p>
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Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<p>4.57 <u>West Virginia Parkways Authority</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Customer Service Center</u></p> <p><u>Po Box 1469</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Charleston, WV 25325-1469</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0 4 8 7</u></p> <p>When was the debt incurred? <u> </u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Ticket</u></p>	<p><u>unknown</u></p>
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<p>4.58 <u>Wright's Custom Body Shop LLC</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Progressive Insurance</u></p> <p><u>1216 Leeson Ave</u></p> <p>Number <u> </u> Street <u> </u></p> <p><u>Cadillac, MI 49601-9097</u></p> <p>City <u> </u> State <u> </u> ZIP Code <u> </u></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>2 6 6 1</u></p> <p>When was the debt incurred? <u>04/14/2023</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Other. Specify <u> </u></p>	<p><u>unknown</u></p>
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Remarks: Progressive Insurance Claim 23-7602661

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

1. Detroit Water and Sewerage Dept On which entry in Part 1 or Part 2 did you list the original creditor?
Name _____ Line 2.4 of (Check one): ☒ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 554899 ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Number _____ Street _____

Last 4 digits of account number _____

Detroit, MI 48255-4899

City _____ State _____ ZIP Code _____

2. Detroit Water and Sewerage Dept On which entry in Part 1 or Part 2 did you list the original creditor?
Name _____ Line 2.5 of (Check one): ☒ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 554899 ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Number _____ Street _____

Last 4 digits of account number _____

Detroit, MI 48255-4899

City _____ State _____ ZIP Code _____

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>	Case number (if known) <u>25-01384-JD</u>
Debtor 2	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>	
	First Name	Middle Name	Last Name	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	<u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b.	<u>\$0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c.	<u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. +	<u>\$20,252.48</u>
	6e. Total. Add lines 6a through 6d.	6e.	<div style="border: 1px solid black; padding: 2px;"><u>\$20,252.48</u></div>
		Total claim	
Total claims from Part 2	6f. Student loans	6f.	<u>\$76,223.69</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	<u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	<u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	<u>\$313,378.30</u>
	6j. Total. Add lines 6f through 6i.	6j.	<div style="border: 1px solid black; padding: 2px;"><u>\$389,601.99</u></div>

Fill in this information to identify your case:

Debtor 1	Jacqueline	Elizabeth	Ard
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Terry	Frank	Nicola
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of South Carolina			
Case number (if known)	25-01384-JD		

☒ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☐ No
☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☒ No. Go to line 3.

☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☐ Yes. In which community state or territory did you live? _____ Fill in the name and current address of that person.

 Name of your spouse, former spouse, or legal equivalent

 Number Street

 City State ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D*, *Schedule E/F*, or *Schedule G* to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 **Ard, Louis**

Name

21215 Dartmouth Dr

Number Street

Southfield, MI 48076-5634

City State ZIP Code

☐ Schedule D, line _____☒ Schedule E/F, line **4.6**☐ Schedule G, line _____3.2 **Global Management Group LLC**

Name

21215 Dartmouth Dr

Number Street

Southfield, MI 48076-5634

City State ZIP Code

☐ Schedule D, line _____☒ Schedule E/F, line **4.27, 4.53, 4.58**☐ Schedule G, line _____

Fill in this information to identify your case:

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>District of South Carolina</u>		
Case number (if known)	<u>25-01384-JD</u>		

☒ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☒ Married
- ☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☐ No
- ☒ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
<u>21215 Dartmouth Dr</u> Number Street	From <u>10/08/2024</u> To <u>03/13/2025</u>	<input checked="" type="checkbox"/> Same as Debtor 1	<input checked="" type="checkbox"/> Same as Debtor 1
<u>Southfield, MI 48076-5634</u> City State ZIP Code		From _____ To _____	
		Number Street	
		City State ZIP Code	
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
		<u>1006 Laurel Oak Dr</u> Number Street	From <u>07/01/2023</u> To <u>07/01/2024</u>
		<u>Valencia, PA 16059-1338</u> City State ZIP Code	

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No
- ☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Debtor 1	Jacqueline	Elizabeth	Ard
Debtor 2	Terry	Frank	Nicola
	First Name	Middle Name	Last Name

Case number (if known) 25-01384-JD

Part 2: Explain the Sources of Your Income**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No☒ Yes. Fill in the details.

	Debtor 1		Debtor 2
	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of income Check all that apply.
From January 1 of current year until the date you filed for bankruptcy:	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$6,829.01</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For last calendar year: (January 1 to December 31, <u>2024</u> YYYY)	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$81,948.16</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For the calendar year before that: (January 1 to December 31, <u>2023</u> YYYY)	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$59,249.21</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business

5. Did you receive any other income during this year or the two previous calendar years?Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.☐ No☒ Yes. Fill in the details.

	Debtor 1		Debtor 2
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.
From January 1 of current year until the date you filed for bankruptcy:			Retirement <u>\$27,835.09</u>
For last calendar year: (January 1 to December 31, <u>2024</u> YYYY)			Retirement <u>\$126,305.36</u>
For the calendar year before that: (January 1 to December 31, <u>2023</u> YYYY)			Retirement <u>\$145,085.26</u>

Debtor 1 Debtor 2	Jacqueline Terry	Elizabeth Frank	Ard Nicola	Case number (if known) 25-01384-JD
	First Name	Middle Name	Last Name	

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$8,575* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$8,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.

☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☒ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name				<input type="checkbox"/> Mortgage
Number Street				<input type="checkbox"/> Car
				<input type="checkbox"/> Credit card
				<input type="checkbox"/> Loan repayment
				<input type="checkbox"/> Suppliers or vendors
City State ZIP Code				<input type="checkbox"/> Other _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. [11 U.S.C. § 101](#). Include payments for domestic support obligations, such as child support and alimony.

☒ No

☐ Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name				
Number Street				
City State ZIP Code				

Debtor 1	Jacqueline	Elizabeth	Ard	
Debtor 2	Terry	Frank	Nicola	Case number (if known) 25-01384-JD
	First Name	Middle Name	Last Name	

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?
Include payments on debts guaranteed or cosigned by an insider.

☒ No

☐ Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name				
Number Street				
City State ZIP Code				

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?
List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☐ No

☒ Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title Spa on Port Royal Sound V. Jacqueline Ard Case number 2025-000648	Appeal of Foreclosure action/judgement	SC Court of Appeals Court Name 1220 Senate Street Number Street Columbia, SC 29201 City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case title Thomas S Crook v Cummings Reality Inc. Case number 2022-0000900398CZ	Real Estate Dispute	State Of Michigan 55th Clare County Court Name 225 West Main Number Street Harrison, MI 48625 City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case title HHR Four Seasons v Jacqueline Ard and et al Case number 2023 CP 0701305		SC Court of Common Pleas Court Name Number Street City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor 1 **Jacqueline** Elizabeth **Ard**
 Debtor 2 **Terry** Frank **Nicola**

Case number (if known) **25-01384-JD**

First Name Middle Name Last Name

		Nature of the case	Court or agency	Status of the case
Case title	HHR Four Seasons v Jacqueline Ard and Terry Nicola		SC Court of Appeals Court Name 1220 Senate Street Number Street Columbia, SC 29201 City State ZIP Code	<input type="checkbox"/> Pending <input checked="" type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number	2021 CP 0701984			
Case title	in re Jacqueline Ard and Terry Nicola	Damages Viloation of Auto stay	J. Bratton Davis Court Name US Bankruptcy Courthouse 1100 Laurel St Number Street Columbia, SC 29201-2423 City State ZIP Code	<input type="checkbox"/> Pending <input checked="" type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number	24-03611			
Case title	in re Jacqueline v Zeidman Jewelry	Violation of Stay	J. Bratton Davis Court Name US Bankruptcy Courthouse 1100 Laurel St Number Street Columbia, SC 29201-2423 City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number	25-80005			
Case title	Hilton Head Resorts v Jacqueline Ard et al	Violation of Stay	J. Bratton Davis Court Name US Bankruptcy Courthouse 1100 Laurel St Number Street Columbia, SC 29201-2423 City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number	25 80006			
Case title	Estate at Westbury v. Jacqueline Ard et al	foreclosure	SC Court of Appeals Court Name 1220 Senate Street Number Street Columbia, SC 29201 City State ZIP Code	<input type="checkbox"/> Pending <input checked="" type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number	ap2025 000677			
Case title	Phillip Lowman v Jacqueline Ard, Global Management Group, LLC	Injury Claim	SC Court of Common Pleas Court Name Number Street City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number	2024CP0700616			

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?
 Check all that apply and fill in the details below.

- ☐ No. Go to line 11.
- ☒ Yes. Fill in the information below.

Debtor 1 **Jacqueline** **Elizabeth** **Ard**
 Debtor 2 **Terry** **Frank** **Nicola**

Case number (if known) **25-01384-JD**

First Name Middle Name Last Name

Title Max Corporation

Creditor's Name

15 Bull St

Number Street

Savannah, GA 31401-2685

City State ZIP Code

Describe the property	Date	Value of the property
2017 Hyundai Elantra	04/09/2025	\$4,500.00

Explain what happened

- ☒ Property was repossessed.
☐ Property was foreclosed.
☐ Property was garnished.
☐ Property was attached, seized, or levied.

Zeidmans Jewelry & Loan of MI

Creditor's Name

2669 Gratiot Ave

Number Street

Detroit, MI 48207-3207

City State ZIP Code

Describe the property	Date	Value of the property
Jewelry property of the Estate retained and sold	03/26/2025	\$35,540.00

Explain what happened

- ☐ Property was repossessed.
☐ Property was foreclosed.
☐ Property was garnished.
☒ Property was attached, seized, or levied.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
☐ Yes. Fill in the details.

Describe the action the creditor took	Date action was taken	Amount

Creditor's Name

Number Street

City State ZIP Code

Last 4 digits of account number: XXXX- _ _ _ _

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☐ No
☒ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
☐ Yes. Fill in the details for each gift.

Debtor 1 **Jacqueline** **Elizabeth** **Ard**
 Debtor 2 **Terry** **Frank** **Nicola**
 First Name Middle Name Last Name Case number (if known) **25-01384-JD**

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			
Number Street			
City State ZIP Code			
Person's relationship to you _____			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No
- ☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name			
Number Street			
City State ZIP Code			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No
- ☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	Value of property lost

Debtor 1 **Jacqueline** **Elizabeth** **Ard**
 Debtor 2 **Terry** **Frank** **Nicola**

Case number (if known) **25-01384-JD**

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☒ No

☐ Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			
Number Street			
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

☒ No

☐ Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			
Number Street			
City State ZIP Code			

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

☒ No

☐ Yes. Fill in the details.

Debtor 1 **Jacqueline** **Elizabeth** **Ard**
 Debtor 2 **Terry** **Frank** **Nicola**
 First Name Middle Name Last Name Case number (if known) **25-01384-JD**

Description and value of property transferred		Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer			
Number Street			
City State ZIP Code			
Person's relationship to you			

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?
 (These are often called *asset-protection devices*.)

- ☒ No
☐ Yes. Fill in the details.

Description and value of the property transferred	Date transfer was made
Name of trust	

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No
☐ Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
XXXX- - - -	<input type="checkbox"/> Checking		
	<input type="checkbox"/> Savings		
	<input type="checkbox"/> Money market		
	<input type="checkbox"/> Brokerage		
	<input type="checkbox"/> Other		
Name of Financial Institution			
Number Street			
City State ZIP Code			

Debtor 1 **Jacqueline** **Elizabeth** **Ard**
 Debtor 2 **Terry** **Frank** **Nicola**
 First Name Middle Name Last Name

Case number (if known) **25-01384-JD**

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
- ☐ Yes. Fill in the details.

Who else had access to it?		Describe the contents	Do you still have it?
Name of Financial Institution <hr/>			<input type="checkbox"/> No <input type="checkbox"/> Yes
Name <hr/>			
Number	Street <hr/>		
City			
State			
ZIP Code <hr/>			

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☐ No
- ☒ Yes. Fill in the details.

Who else has or had access to it?		Describe the contents	Do you still have it?
Go-Store It Name of Storage Facility <hr/>		Assorted Business equipment <hr/>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Name <hr/>			
Number	Street <hr/>		
City			
State			
ZIP Code <hr/>			
Bluffton, SC 29910 City			
PODS Name of Storage Facility <hr/>		Personal belongs. <hr/>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Name <hr/>			
Number	Street <hr/>		
City			
State			
ZIP Code <hr/>			
Leetsdale, PA 15056 City			

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
- ☐ Yes. Fill in the details.

Debtor 1 **Jacqueline** **Elizabeth** **Ard**
 Debtor 2 **Terry** **Frank** **Nicola**
 First Name Middle Name Last Name Case number (if known) **25-01384-JD**

Where is the property?		Describe the property	Value
Owner's Name _____ Number Street _____ Number Street _____ City State ZIP Code _____ City State ZIP Code _____		<div style="border: 1px solid black; height: 100px; width: 100%;"></div>	_____

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
- ☐ Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site _____ Governmental unit _____ Number Street _____ Number Street _____ City State ZIP Code _____ City State ZIP Code _____	<div style="border: 1px solid black; height: 100px; width: 100%;"></div>	_____

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
- ☐ Yes. Fill in the details.

Debtor 1
Debtor 2

**Jacqueline
Terry**

**Elizabeth
Frank**

**Ard
Nicola**

Case number (if known) **25-01384-JD**

First Name Middle Name Last Name

Governmental unit

Environmental law, if you know it

Date of notice

Name of site

Governmental unit

Number Street

Number Street

City State ZIP Code

City State ZIP Code

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☒ No

☐ Yes. Fill in the details.

Court or agency

Nature of the case

Status of the case

Case title

Court Name

Number Street

Case number

City State ZIP Code

☐ Pending

☐ On appeal

☐ Concluded

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)

☐ A partner in a partnership

☒ An officer, director, or managing executive of a corporation

☐ An owner of at least 5% of the voting or equity securities of a corporation

☐ No. None of the above applies. Go to Part 12.

☒ Yes. Check all that apply above and fill in the details below for each business.

Global Management Group LLC

Name

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Property Management

EIN: 6 1 - 1 6 0 4 1 1 1

21215 Dartmouth Dr

Number Street

Name of accountant or bookkeeper

Dates business existed

Southfield, MI 48076-5634

City State ZIP Code

From 09/24/2009 **To** _____

Debtor 1 **Jacqueline** **Elizabeth** **Ard**
 Debtor 2 **Terry** **Frank** **Nicola**

Case number (if known) **25-01384-JD**

First Name Middle Name Last Name

Beachside Estates LLC

Name

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Multi-member LLC Partnership

EIN: **8 8 - 1 0 0 9 4 3 1**

100 Kensington Blvd Unit 1106

Number Street

Name of accountant or bookkeeper

Dates business existed

Bluffton, SC 29910

City State ZIP Code

From **03/03/2022** To _____

Global Management Group LLC

Name

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Property Management

EIN: **6 1 - 1 6 0 4 1 1 1**

21215 Dartmouth Dr

Number Street

Name of accountant or bookkeeper

Dates business existed

Southfield, MI 48076-5634

City State ZIP Code

From **09/24/2009** To _____

Beachside Estates LLC

Name

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Multi-member LLC Partnership

EIN: **8 8 - 1 0 0 9 4 3 1**

100 Kensington Blvd Unit 1106

Number Street

Name of accountant or bookkeeper

Dates business existed

Bluffton, SC 29910

City State ZIP Code

From **03/03/2022** To _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☒ No

☐ Yes. Fill in the details below.

Date issued

Name

MM / DD / YYYY

Number Street

City State ZIP Code

Debtor 1
Debtor 2

Jacqueline
Terry
First Name

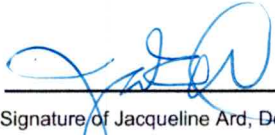
Elizabeth
Frank
Middle Name

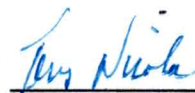
Ard
Nicola
Last Name

Case number (if known) 25-01384-JD

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X 
Signature of Jacqueline Ard, Debtor 1
Date 05/08/2025

X 
Signature of Terry Nicola, Debtor 2
Date 05/08/2025

Did you attach additional pages to your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No
☐ Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	<u>Jacqueline</u>	<u>Elizabeth</u>	<u>Ard</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Terry</u>	<u>Frank</u>	<u>Nicola</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>District of South Carolina</u>		
Case number (if known)	<u>25-01384-JD</u>		

☒ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

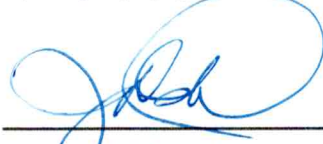
Sign Below

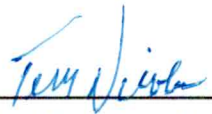
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X 
Jacqueline Ard, Debtor 1

X 
Terry Nicola, Debtor 2

Date 05/08/2025
MM/ DD/ YYYY

Date 05/08/2025
MM/ DD/ YYYY

IN THE UNITED STATES BANKRUPTCY COURT
DISTRICT OF SOUTH CAROLINA
CHARLESTON DIVISION

IN RE: Ard, Jacqueline Elizabeth
Nicola, Terry Frank

CASE NO 25-01384-JD

CHAPTER 13

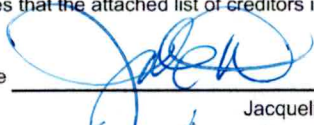
AMENDED

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 05/08/2025

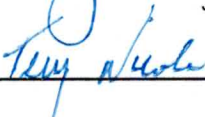
Signature



Jacqueline Elizabeth Ard, Debtor

Date 05/08/2025

Signature



Terry Nicola, Joint Debtor

ADT Security Services
PO Box 371878
Pittsburgh, PA 15250-7878

Advantage Aviator Bankruptcy Dept
Portfolio Recovery Associates, LLC
130 Corporate Blvd
Norfolk, VA 23502-4952

American Express National Bank
Becket and Lee LLP
P.O. Box 3001
Malvern, PA 19355

Armstrong Cable
PO Box 37749
Philadelphia, PA 19101-5049

AT&T
Valor Intelligent Processing, LLC
PO Box 5014
Carol Stream, IL 60197-5014

AWA Collections
Santa Rosa Emergency
PO Box 6605
Orange, CA 92863

Beaufort County Treasurer
Property Tax
Po Box 105176
Atlanta, GA 30348-5176

Bromley Law Firm LLC
Evan K. Bromley
211 Goethe Rd Ste B
Bluffton, SC 29910-6014

Capital One Auto Finance
AIS Portfolio Services, LLC
4515 N Santa Fe Ave. Dept. APS
Oklahoma City, OK 73118

CitiBank Best Buy
P.O. Box 790034
Saint Louis, MO 63179-0034

City of Detroit Water and Sewerage Dept
735 Randolph St
Detroit, MI 48226-2830

Comenity Caesars Rewards
PO Box 650960
Dallas, TX 75265

Consumer Energy Company
Attn: Legal Dept
One Energy Plaza Dr
Jackson, MI 49201-2357

County of Allegheny Treasurer
Room 108 Courthouse
436 Grant St
Pittsburgh, PA 15219

Coyne Oil
Attn: Rose
513 W 5th St
Clare, MI 48617-9405

Detroit Water and Sewerage Dept
P.O. Box 554899
Detroit, MI 48255-4899

DirectTV, LLC
CT Corporation
1209 N Orange St
Wilmington, DE 19801-1120

DTE Energy
Attention Legal Department
PO Box 740786
Cincinnati, OH 45274-0786

East Pittsburgh Borough
813 Linden Ave
East Pittsburgh, PA 15112

Esq. Jannine M. Mutterer
5 Cedar St.
Bluffton, SC 29910-7215

Estate At Westbury Owners Assoc, Inc
Board of Directors
85 Kensington Blvd
Bluffton, SC 29910-4884

First Energy
Penn Power
Po Box 16001
Reading, PA 19612-6001

Fortiva Bobs Discount
TBOM - ATLSA
6 Concourse Parkway Second Floor
Atlanta, GA 30328

Go-Store It
33 Parmenter Rd.
Bluffton, SC 29910

Hilton Head Resort Four Seasons Centre
Wm Weston J Newton
Jones, Simpson & Newton, PA
Po Box 1938
Bluffton, SC 29910-1938

Home Depot Commercial

Centralized bankruptcy

PO Box 790034

Saint Louis, MO 63179

Home Depot Loan #3877

Po Box 2730

Alpharetta, GA 30023-2730

Honorable Nicola Henry-Taylor

Allegheny Court of Common Pleas

712 City Council Building

414 Grant St

Pittsburgh, PA 15219-2409

Hughes Network Systems

PO Box 96874

Chicago, IL 60693-6874

Ian D, Maguire and Tiffany Buffkin

Maguire Law Firm

1600 North Oak St Ste. B

Myrtle Beach, SC 29577-3525

Jordan Tax Service
102 Rahway Rd
McMurray, PA 15317

JPMC
c/o National Bankruptcy Services, LLC
PO Box 9013
Addison, TX 75001

JPMorgan Chase Bank, N.A.
Robertson, Anschutz, Schneid, Crane
6409 Congress Avenue 100
Boca Raton, FL 33487

Julie A. Franklin, Esq
Po Box 2976
Bluffton, SC 29910-2976

Kohls Payment Center
PO Box 3043
Milwaukee, WI 53201-3043

Komatsu Benefit Dept
Mark Harder
401 E Greenfield Ave
Milwaukee, WI 53204-2941

Law Office of Scott M. Wild LLC
Scott M. Wild
37 New Orleans Road Suite F
Hilton Head Island, SC 29928

Lincoln Township
P.O. Box 239
Lake George, MI 48633

Louis Ard
21215 Dartmouth Dr
Southfield, MI 48076-5634

LVNV Funding, LLC
Resurgent Captial Services
PO Box 10587
Greenville, SC 29603-0587

Master in Equity
102 Ribaut Rd 2nd Floor
Beaufort, SC 29902-4453

Medical University of South Carolina
1 Poston Rd Ste 220
Charleston, SC 29407

Midland Credit Management
320 East Big Beaver
Troy, MI 48083-1271

Monevolnc
8910 University Cntr Lane Ste. 400
San Diego, CA 92122-1025

Morgan Lewis & Bockius LLP
Attn: Matt Hawes
One Oxford Centre, Thirty-Second FLR
Pittsburgh, PA 15219-6401

Morgan Templeton
145 King Street Ste. 300
Charleston, SC 29401-2253

Mutterer Law Firm, LLC
Jannine M. Mutterer, Esq
5 Red Cedar Street Suite 102
Bluffton, SC 29910

Nationstar Mortgage, LLC
Attn: Bankruptcy Department
PO Box 619096
Dallas, TX 75261-9741

Nationwide Credit Inc
1225 Washington St Ste. 301
Tempe, AZ 85288-1239

NES
PNC Bank
2479 Edison Blvd Unit A
Twinsburg, OH 44087

Norman Jewelry and Loan
24777 Telegraph Suite B
Southfield, MI 48034

Northstar Location Services
4285 Genesee St.
Buffalo, NY 14225-1943

Office Depot Business Credit
Dept 563-8406380360
PO Box 70612
Philadelphia, PA 19176-0612

Ohio Turnpike Easy Pass
PO Box 94672
Cleveland, OH 44101

PA Dept of Revenue
Bureau of Individual Taxes
PO Box 280504
Philadelphia, PA 19176-0612

PA Turnpike Toll By Plate
PO Box 645631
Pittsburgh, PA 15264-5254

Pacer Service Center
PO Box 780549
San Antonio, TX 78278

Palmetto Electric Cooperative Inc
Michelle Tyler
111 Matthews Drive
Hilton Head Island, SC 29926

Peoples Gas
National Recovery Agency
PO Box 644760
Pittsburgh, PA 15264-4760

Pittsburgh Water
Penn Liberty Plaza I
1200 Penn Avenue
Pittsburgh, PA 15222

Plymouth Rock Assurance
695 Atlantic Ave
Boston, MA 02111-2605

PNC Bank
1900 E 9th St
Cleveland, OH 44114-3484

PODS Enterprises, LLC
Legal Department
5585 Rio Vista Dr.
Clearwater, FL 33760

Polly Nicola
2583 Lower Assembly Drive
Fort Mill, SC 29708

Quantum3 Group LLC
Agent for Crown Asset Management LLC
PO Box 788
Kirkland, WA 98083-0788

Radius Global Solutions
7831 Glenory Rd Ste. 250
Minneapolis, MN 55439-3117

Resurgent Receivables, LLC
Resurgent Capital Services
PO Box 10587
Greenville, SC 29603-0587

S.C. Dept of Revenue and Taxation
PO Box 125
Columbia, SC 29214-0001

SC Department of Motor Vehicles
SC Driver Records
PO Box 1498
Blythewood, SC 29016-0028

SC Department of Revenue
Office of General Counsel
300A Outlet Point Blvd
Columbia, SC 29210

Semina Delaurentis
66 Quail Run
Torrington, CT 06790-2549

Smith Debnam Narron Drake Saintsing
& Myers, LLP
Lucas S. Fautua
171 Church St Ste 120c
Charleston, SC 29401-3136

South Carolina Dept of Motor Vehicles
PO Box 1498
Blythewood, SC 29016-1498

Synchrony Bank
Paypal Credit
PO Box 669809
Dallas, TX 75266

Synchrony Bank Sams Business
PO Box 669809
Dallas, TX 75266

Synchrony Bank Sams Master Card
PO Box 669809
Dallas, TX 75266

Synchrony Bank Score Rewards
PO Box 669809
Dallas, TX 75266

Synergetic Communication
PO Box 680608
Franklin, TN 37068-0608

Tate and Kirlin Assoc
4800 E Street Rd Ste 170
Fstrvl Trvose, PA 19053-6660

Taybron Law Firm LLC
3399 Churchview Ave
Pittsburgh, PA 15227-4358

TBOM-ATLAS-Fortiva
6 Concourse Pkwy # 2
Atlanta, GA 30328-6117

TD Bank
PO Box 840
Columbus, GA 31908

TD Bank
Target Card Services
PO Box 673
Minneapolis, MN 55440-0673

TD Bank
PO Box 84037
Columbus, GA 31908

The Hertz Corporation
8501 Williams Rd
Estero, FL 33928-3325

The Huntington National Bank
PO Box 89424 OPC856
Cleveland, OH 44101

The Spa on Port Royal Sound
Board of Directors
239 Beach City Rd
Hilton Head, SC 29926-4707

The Woodlands at St Barnabas
Thomas E. Breath
128 West Cunningham St
Butler, PA 16001

Ticket Division
PA Turnpike EZ Pass
300 E Park Dr
Harrisburg, PA 17111-2729

Title Max of South Carolina
Attn: John B Kelchner
1901 Main St. Ste 900
Columbia, SC 29201

T-Mobile
Po Box 53410
Bellevue, WA 98015-3410

Traffic Magistrate
4819 Bluffton Parkway
Bluffton, SC 29910

U.S. Department of Education
Nelnet
121 South 13th St
Lincoln, NE 68508

UPMC
Po Box 371472
Pittsburgh, PA 15250-7472

Verizon
Wireless Bankruptcy Administration
500 Technology Dr Ste. 500
Saint Charles, MO 63304

Viking Client Services
Hertz Damage Recovery Team
7500 Office Ridge Cir Ste 100
Eden Prairie, MN 55344-3763

Wayne Co Treasurer
400 Monroe 5th floor
Detroit, MI 48226

Wells Fargo Bank
Po Box 5058
Portland, OR 97208-5058

West Virginia Parkways Authority
Customer Service Center
Po Box 1469
Charleston, WV 25325-1469

West-Aircomm FCU
Weltman, Weinberg & Reis Co LPA
5990 W Creek Rd Ste 200
Independence, OH 44131-2191

Westlake Financial
2 Equity Way Ste 200
Westlake, OH 44145-1045

Wright's Custom Body Shop LLC

1216 Leeson Ave

Cadillac, MI 49601-9097

Zeidman's Jewelry & Loan of MI

Best Law Tara E. Nauful

Po Box 2374

Mt Pleasant, SC 29465-2374